Birth Defects Council Strategic Plan

**February 2020**

**Vision**

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| **Core Goals** | * Accurate identification and automatic collection of birth defects * Birth defects prevented * Connectedness to support resources for families | **3-Year Picture** |
| **Future Date:** January 2023  **Identify Birth Defects:**   * Sending data back to clinics to improve collection * Working with largest health systems to capture 75%+ of all birth defects * Consequences for not reporting   **Prevent Birth Defects:**   * Strategy in place for responding to birth defects incidence and trends with prevention measures   **Support Children, Families, and Communities:**   * Program renamed * Registered families connecting to support resources   **Increase Program Funding:**   * Two full time resources dedicated to the Birth Defects Registry * DHS budget allocation increase to support two full time employees * Active partnership with medical education programs and community partners to aid funding * Centers for Disease Control and Prevention (CDC) funding in place |
| **Mission Statement** | The council makes recommendations to the Department of Health Services (DHS), including the Wisconsin Birth Defects Prevention and Surveillance Program, regarding the establishment of the Birth Defects Registry (Registry) (i.e., content, format, procedures for reporting as outlined in statute), advises the DHS Secretary, and makes recommendations related to the diagnosed conditions reported and the impact of those conditions on children, families, and the health care system. |
| **5-Year Target** | **Identify Birth Defects:**   * Identification process is automated with all healthcare systems in the state * 95% of all birth identified birth defects are reported   **Prevent Birth Defects:**   * System is up to date and nimble enough to allow real-time trends and a response to those trends * Two way communication with clinics to allow real-time prevention tactics   **Support Children, Families, and Communities**:   * Children are automatically connected to state and community resources through all mediums (electronic and mail)   **Increase Program Funding:**   * Program is funded in the state budget and partnerships are established with interested third parties to enhance the program |
| **Council Strategy** | **Target Audience:**   * DHS * Healthcare providers and systems * Community resources * Families   **Top Strengths:**   * Diverse, motivated, knowledgeable council * Strong leadership and staff * Updated state statute   **Top Initiatives:**   * Identify birth defects * Prevent Birth Defects * Support children, families, and communities * Increase program funding |

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**Action Plan**

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| **1-Year Plan** | **Deliverables** | **Issues List** |
| **Future Date:** January 2021  **Measurables:** Quarterly progress reports  **Goals for the Year:**  **Identify Birth Defects:**   * Build relationships with health systems and identify the right people * Develop guidance and training for reporting system * Identify largest birth hospitals * Meet with EPIC on potential collaboration * Identify and collaborate with cross state registries   **Prevent Birth Defects:**   * Develop identification and reporting method which facilitates responsiveness for prevention purposes   **Support Children, Families, and Communities:**   * Rename program * Develop stories to bring visibility to the issue   **Increase Program Funding:**   * Develop a budget proposal * Present and facilitate conversation on other resource opportunities (i.e. internship program, epi model, tracking program) * Research and share possibility of MCW or partnership funding * Create a package for meetings with funders * Apply for CDC funding | **Future Date:** June 2020  **Measurables:** Quarterly adjustment as tasks are finished and issues are addressed  **Deliverables for the Quarter with Responsible Party:**  **Identify Birth Defects:**   * Identify specific health systems for contact (Staff, A. Zenk, S. Davidson) * Develop guidance and training for reporting system (Staff and J. Camponeschi) * Develop plan around Sowmya leaving and who will pick up the work (All) * Identify quality registries in other states (Staff)   **Prevent Birth Defects**:   * Work on identification deliverables   **Support Children, Families, and Communities:**   * Work on identification deliverables   **Increase Program Funding:**   * Develop a budget proposal (Peggy) * Create a package for meetings with funders (Peggy and R. Freund) * Apply for CDC funding (Staff) * Hire for internships and fellowships that have been posted (Anne, Penny) | **Weaknesses:**   * Causation is often unknown * Funding and resources * Health care system structure * Limited data reporting system * Statute gaps and limitations * Not seen as a priority   **Threats:**   * Health care access and cost * Health literacy * Income inequality * Caregivers and childcare funding and quantity * Little public health funding |